

PART B - FEE(S) TRANSMITTAL

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20995 7590 08/08/2003

KNOBBE MARTENS OLSON & BEAR LLP
 2040 MAIN STREET
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 IRVINE, CA 92614



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Rose M. Thiessen, Ph.D. (Depositor's name)
 (Signature)
 August 22, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/489,588	01/21/2000	Mark C. Shults	DEXCOM-04114	6019

TITLE OF INVENTION: DEVICE AND METHOD FOR DETERMINING ANALYTE LEVELS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$0	\$650	11/10/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
NASSER, ROBERT L	3736	600-584000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Knobbe Martens
 2 Olson & Bear LLP
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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DexCom, Inc.

San Diego, California

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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8/22/03

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